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CONFIRMATION NO. 3934

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**APPLICANTS**

R. Kent Hermsmeyer, Portland, OR;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/428,811 11/22/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
**\*\* 01/17/2004**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 4	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged	Allowance <i>Unertland</i> Examiner's Signature	Initials <i>UL</i>			

**ADDRESS**

29085

**TITLE**

Estrogen beta receptor agonists to prevent or reduce the severity of cardiovascular disease

FILING FEE RECEIVED 412	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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